CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH
WALTER M. DICKIE, M.D., Director

Weekly Bulletin

STATE BOARD OF PUBLIC HEALTH
GEORGE E. EBRIGHT, M.D., President FRED F. GUNDRUM, M.D., Vice President
A. J. SCOTT, Jr., M.D. ADELAIDE BROWN, M.D. EDWARD F. GLASER, M.D.
ROBERT A. PEERS, M.D. WALTER M. DICKIE, M.D.

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.
Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. VIII, No. 21 June 29, 1929 GUY P. JONES EDITOR

Medical School Library
JUL 9 - 1929
University of California

Cancer Deaths Exceed Tuberculosis Deaths for First Time in California History

In 1928 there were 6401 deaths from cancer in California and there were 6073 deaths from tuberculosis during the same year. Since the state vital statistics have been recorded, in 1906, this is the first year in which cancer deaths have exceeded tuberculosis deaths. The cancer death rate per hundred thousand population also exceeded the tuberculosis mortality rate per hundred thousand population. These rates for 1928 were 147.3 for cancer and 139.7 for tuberculosis. It is interesting to note that in 1906 there were three times as many tuberculosis deaths as cancer deaths. Each year since 1906 has shown an increase in the numbers of deaths from cancer, and after twenty-three years cancer has finally outstripped tuberculosis as a destroyer of the lives of Californians.

Tuberculosis causes many deaths of nonresidents in California, as well as of many individuals who have been within the state for a few years only. The enviable climate naturally attracts individuals who are suffering from tuberculosis. This is a considerable factor in the maintenance of a high tuberculosis mortality rate in California. In spite of this factor, however, the tuberculosis death rate in California has been almost cut in two since 1906.

It is possible, also, that many adults who suffer from cancer come to California to spend the last years of their lives enjoying this state's unusual facilities for invalids. Since cancer is a disease of middle age and of old age, it is reasonable to suppose that the increase in the cancer death rate may be attributable in a large degree to the migration of sick persons to California. Another factor that must be given consideration is the increased facilities for diagnosis of cancer that have been developed within the state during the last decade.

Cancer caused 9.6 per cent of all deaths in California last year and tuberculosis 9.2 per cent of all deaths in California in 1928. The large cities have a larger proportion of deaths from cancer than do the rural communities. This may be due to the facilities for treatment that are provided in large centers of population, and there may be unknown factors in the larger cities that have to do with the greater numbers of deaths from cancer within their boundaries. In San Francisco, in 1928, there were 1029 cancer deaths, out of a total of 8274 deaths, 12.4 per cent of all deaths being deaths from cancer. In Los Angeles, in 1928, there were 1402 deaths from cancer, out of a total of 13,579 deaths. This represents 13.2 per cent of all deaths in Los Angeles last year. In Oakland there were 333 cancer deaths, out of a total of 3174 deaths last year. This represents 10.5 per cent of all deaths in Oakland last year. The following table gives the total numbers of deaths from tuberculosis and cancer in California, 1906-1928, together with the rates per hundred thousand population, by years, for each of these diseases:

Year	Tuberculosis	Rate per 100,000 population	Cancer	Rate per 100,000 population
1906	4,437	221.8	1,462	73.0
1907	4,607	225.5	1,546	74.8
1908	4,565	209.0	1,737	78.4
1909	4,673	203.9	1,945	84.3
1910	4,872	203.0	1,984	82.8
1911	5,114	203.9	2,029	81.5
1912	5,128	196.0	2,306	89.4
1913	5,402	198.3	2,565	96.0
1914	5,320	187.8	2,687	97.3
1915	5,551	188.9	2,776	97.2
1916	5,267	172.8	2,879	94.4
1917	5,457	172.9	3,085	97.7
1918	5,888	180.4	3,199	98.0
1919	5,678	168.3	3,519	104.3
1920	5,397	155.0	3,780	108.6
1921	5,427	151.8	4,025	112.1
1922	5,847	158.1	4,484	121.3
1923	5,724	150.4	4,702	123.6
1924	6,023	153.9	5,114	130.7
1925	5,896	146.6	5,278	131.3
1926	5,794	140.4	5,638	136.5
1927	5,960	140.7	5,927	139.9
1928	6,073	139.7	6,401	147.3

TULAREMIA APPEARS IN CALIFORNIA AGAIN

Two cases of tularemia have occurred in California recently, both of which were in persons who had skinned wild rabbits. One of these cases was in northern California and the other was in southern California. The case in the northern end of the state, however, was contracted in Nevada, where the patient had skinned a jack rabbit. These are the first cases of this disease that have been reported in California this year. In 1927 there were four reported cases, and in 1928 there were sixteen reported cases within the state. Eleven of these, however, were in persons who had received their infections in Nevada.

As a matter of precaution, all individuals who must handle wild rabbits are advised to wear rubber gloves. Hunters are advised especially to beware of rabbits which may appear sick, which are sluggish in their movements and which are easily killed. Very often such rabbits are suffering from tularemia and individuals who skin them place themselves in danger of contracting the disease. While the disease is not often fatal, it causes pronounced disability which may persist for a long period of time.

While most human cases occur through direct contact with infected animals, the disease is also transmitted by the deer fly and the rabbit louse. Vacationists should protect themselves against the attacks of deer flies. For many years this disease was called deer fly fever. Investigations undertaken by Surgeon Edward Francis of the United States Public Health Service in Utah revealed the fact that deer fly fever and tularemia are identical diseases. The causative organism—*B. Tularense*—was discovered in 1911 by Surgeons McCoy and Chapin of the United States Public Health Service in the California county whence the organism received its name. This discovery was made in connection with plague work in ground squirrels, and the organism was isolated in squirrels that were under examination for plague. The disease has been found in almost every state of the Union, and wild rabbits seem to be more commonly infected than any other animals. The disease has never been found in tame rabbits.

ROCKY MOUNTAIN SPOTTED FEVER SEASON IS AT HAND

Cases of Rocky Mountain spotted fever occur each year in northeastern California, the present year being no exception, as a few cases have been reported during the late spring. Ten cases, with four deaths, have been reported in Montana this year. Oregon reports forty-three cases during the same period. The disease is found in California in only two or three of the border counties in the extreme northeastern part of the state. It has existed in some portions of the northwestern United States ever since that part of the country was first settled. During recent years, it has been found in almost all states of the Union. The disease is more virulent in some localities than in others. It is of first importance in many of the northwestern communities, and in one valley in Montana the mortality rate is eighty to ninety per cent. It adjacent communities in other states the mortality rate is as low as three to four per cent. As nearly as can be determined, the mortality rate for Rocky Mountain spotted fever for all states other than Montana and Idaho varies from seven to twelve per cent. Incomplete records in many places make it impossible to determine rates definitely. The United States Public Health Service has for several years maintained a Rocky Mountain spotted fever laboratory in the Bitter Root Valley of Montana, where the disease is particularly virulent. A vaccine has been developed in this laboratory, which physicians may obtain by addressing the medical officer in charge, United States Public Health Service, Hamilton, Montana. The disease is transmitted to many only by the wood tick, *Dermacentor venustus*. A parasite has been imported from France, and experiments with this parasite in the Montan district indicate that it may be of value in the control of ticks. This work is still in process of development, however, and can, as yet, be regarded only as experimental. It is hoped that the parasite may be of value in the extermination of wood ticks.

A child will learn three times as fast when he is in tune, as he will when he is dragged to his task.

—Locke.

DIPHTHERIA, TYPHOID AND EPIDEMIC MENINGITIS DECLINE

It is interesting to note in glancing over the communicable disease records that the incidence of diphtheria during the month of May, and also for the first five months of this year, is lower than at any time since 1919:

Year	*Month of May*	*Jan. to May inclusive*
1919	173	938
1920	542	2,612
1921	576	2,994
1922	637	3,952
1923	790	3,607
1924	953	5,642
1925	430	2,722
1926	450	2,363
1927	500	3,037
1928	457	2,493
1929	268	1,304

This decline is due largely to the fact that the low tide of the cycle is due—there are variations in the incidence which occur independent of control methods applied by man. However, it is known that the use of diphtheria toxin-antitoxin as a means of preventing the disease lowers the incidence, and this undoubtedly is influencing this reduction in the number of cases of diphtheria reported this year.

Typhoid fever is another in the list of communicable diseases which is conspicuously low this year. Morbidity records have been obtained in systematic fashion since 1913; during these sixteen years the lowest incidence of typhoid fever was recorded in 1927, when only 683 cases were reported. In that year, for the first five months, 238 cases were reported; this year, during the first five months, only 181 cases come to our attention:

Month	*1927*	*1929*
January	52	28
February	23	40
March	69	42
April	47	23
May	47	48
	238	181

The vacation season has opened and it is strongly recommended that persons who are planning summer outings into districts where the safety of the drinking water or milk supply can not be insured with reasonable certainty obtain protection by means of typhoid vaccination, and also remember that the typhoid organisms are readily killed by boiling. Any water or milk supply can be rendered safe for human consumption by boiling. It is hoped that our commendable typhoid record will be retained throughout the year.

Epidemic meningitis is on the decline. Around twenty cases per week have been reported for several months, but during the first two weeks in June, only twelve and eleven cases, respectively, have been brought to our attention:

January	68 cases	
February	86 cases	
March	111 cases	
April	97 cases	
May	108 cases	
June	23 cases	(1–12) (2–11)
Total	493 cases	

This disease does not seem to flourish in dry hot, or even warm, weather. It is, therefore, to be expected that epidemic meningitis will soon cease to attract attention and will resolve into only a few sporadic cases.

These reductions are significant. The increase in mumps and scarlet fever indicates that reporting is satisfactory. To date this year, 10,566 cases of mumps and 10,179 cases of scarlet fever have been reported. During 1928, 10,277 cases of mumps were reported and that represents the largest annual number of cases ever recorded in California. The largest number of cases of scarlet fever recorded was in 1924, with 8955 cases. The reporting of 10,566 cases of mumps for this period of five months compared with 10,277 for the twelve months of 1928 and the 10,179 cases of scarlet fever compared with 8955 for the twelve months of 1924 indicate that reporting is unusually good.

For full indeed is earth of woes, and full the sea; and in the day as well as night diseases unbidden haunt mankind, silently bearing ills to men.

MORBIDITY*

Diphtheria.

58 cases of diphtheria have been reported, as follows: Alameda County 1, Oakland 5, Fresno County 1, Kings County 1, Los Angeles County 3, Alhambra 2, El Monte 1, Long Beach 1, Los Angeles 21, Merced County 2, Merced 1, Salinas 1, Santa Ana 1, Riverside 3, Oceanside 3, San Diego 5, San Francisco 1, Paso Robles 1, Santa Clara County 3, Palo Alto 1.

Scarlet Fever.

259 cases of scarlet fever have been reported, as follows: Alameda County 1, Alameda 1, Albany 2, Berkeley 4, Oakland 9, Jackson 2, Chico 2, Contra Costa County 5, Antioch 1, Richmond 2, Fresno County 13, Fresno 2, Glenn County 1, Humboldt County 2, Kern County 3, Bakersfield 1, Kings County 3, Lemoore 2, Los Angeles County 21, Alhambra 1, Burbank 1, El Monte 1, Glendale 3, Huntington Park 1, Inglewood 1, Long Beach 6, Los Angeles 43, Pasadena 1, Whittier 2, South Gate 1, Monterey Park 1, Signal Hill 1, Bell 3, Ross 1, Merced 1, Orange County 1, Roseville 1, Riverside 1, Sacramento County 3, Sacramento 3, National City 2, San Diego 10, San Francisco 38, San Joaquin County 2, Stockton 14, San Mateo County 1, South San Francisco 1, Santa Maria 1, Santa Clara County 10, Gilroy 1, Palo Alto 4, San Jose 9, Watsonville 1, Vallejo 1, Sonoma County 3, Tulare County 4, Exeter 1, Sonora 1, Marysville 1.

---

* From reports received on June 24th and 25th, for week ending June 22d.

Measles.

152 cases of measles have been reported, as follows: Alameda County 3, Alameda 2, Albany 1, Oakland 22, Crescent City 1, Fresno County 1, Fresno 5, Humboldt County 1, Lassen County 1, Susanville 1, Los Angeles County 2, Burbank 2, Glendale 6, Huntington Park 2, Long Beach 1, Los Angeles 33, Maywood 1, Sacramento County 1, Sacramento 22, San Diego 9, San Francisco 18, Stockton 4, San Luis Obispo County 1, Santa Barbara County 3, Gilroy 1, Palo Alto 2, Fillmore 6.

Smallpox.

24 cases of smallpox have been reported, as follows: Berkeley 2, Eureka 1, Los Angeles County 5, Long Beach 1, Los Angeles 3, Salinas 1, San Mateo County 3, Tulare County 8.

Typhoid Fever.

16 cases of typhoid fever have been reported, as follows: Berkeley 1, Los Angeles County 1, Claremont 1, Los Angeles 3, Pomona 3, Riverside County 4, Sacramento County 1, Santa Clara County 1, Tehama County 1.

Whooping Cough.

163 cases of whooping cough have been reported, as follows: Berkeley 11, Livermore 1, Oakland 11, Fresno 2, Orland 1, Los Angeles County 23, Burbank 1, Compton 1, Glendora 3, Long Beach 2, Los Angeles 34, Pasadena 3, San Gabriel 1, Whittier 1, South Gate 2, Brea 2, Santa Ana 1, La Habra 2, Placentia 2, Riverside County 1, Riverside 2, San Diego County 7, National City 1, San Diego 11, San Francisco 10, San Joaquin County 5, Stockton 1, Tracy 1, Paso Robles 4, Santa Clara County 1, Palo Alto 5, San Jose 2, Vallejo 6, Woodland 2.

Meningitis (Epidemic).

12 cases of epidemic meningitis have been reported, as follows: Oakland 1, Los Angeles County 1, Los Angeles 3, Montebello 1, Salinas 1, San Diego 1, San Francisco 2, San Mateo County 1, Santa Maria 1.

Poliomyelitis.

4 cases of poliomyelitis have been reported, as follows: Los Angeles County 1, Los Angeles 1, South Gate 1, Sacramento County 1.

Encephalitis (Epidemic).

San Francisco reported one case of epidemic encephalitis.

Rocky Mountain Spotted Fever.

Modoc County reported one case of Rocky Mountain spotted fever.

Coccidioidal Granuloma.

Kern County reported one case of coccidioidal granuloma.

NOTE.—Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1929				1928			
	Week ending			Reports for week ending June 22 received by June 25	Week ending			Reports for week ending June 23 received by June 26
	June 1	June 8	June 15		June 2	June 9	June 16	
Actinomycosis	0	0	0	0	1	0	0	1
Botulism	0	0	0	0	1	0	0	0
Chickenpox	435	496	313	246	507	505	351	208
Coccidioidal Granuloma	2	0	0	1	0	0	0	1
Diphtheria	59	44	45	58	79	84	87	72
Dysentery (Amoebic)	1	0	0	0	0	2	0	1
Dysentery (Bacillary)	0	1	5	0	3	1	0	0
Encephalitis (Epidemic)	0	1	0	1	0	3	1	1
Erysipelas	23	23	10	13	14	14	12	19
Food poisoning	6	0	3	0	0	11	4	0
German Measles	33	24	14	12	251	206	121	84
Gonococcus Infection	56	91	107	102	86	141	97	69
Hookworm	0	0	1	0	0	0	0	0
Influenza	16	25	19	21	30	41	23	23
Jaundice (Epidemic)	0	0	0	0	1	0	0	0
Leprosy	0	0	0	0	0	0	1	0
Malaria	1	2	2	8	0	1	1	0
Measles	142	129	129	152	92	75	51	38
Meningitis (Epidemic)	20	12	11	12	3	3	3	2
Mumps	438	489	383	265	345	255	241	146
Ophthalmia Neonatorum	1	0	1	0	1	1	1	1
Paratyphoid Fever	0	0	0	0	0	1	1	1
Pellagra	0	1	1	0	2	4	0	1
Pneumonia (Lobar)	43	55	29	49	34	37	42	33
Poliomyelitis	3	3	4	4	7	8	2	3
Rabies (Human)	0	0	0	0	0	0	1	1
Rabies (Animal)	17	14	16	8	15	7	22	16
Rocky Mt. Spotted Fever	0	3	0	1	2	0	0	0
Scarlet Fever	338	458	345	259	160	134	151	102
Smallpox	37	30	47	24	36	11	18	19
Syphilis	91	118	227	99	90	196	169	125
Tetanus	1	2	0	1	3	2	2	2
Trachoma	0	0	0	4	2	2	2	2
Tularemia	0	0	0	0	0	1	0	0
Tuberculosis	170	239	184	217	165	261	203	239
Typhoid Fever	7	9	13	16	15	14	14	13
Undulant Fever	2	1	2	0	0	0	0	0
Whooping Cough	255	252	198	163	236	341	225	192
Totals	2,197	2,522	2,109	1,736	2,181	2,362	1,846	1,415

Diphtheria continues a low level.

* * *

Typhoid fever appears to be on the increase.

* * *

Measles is climbing.

* * *

Chickenpox, mumps, scarlet fever and whooping cough on the decline.

CALIFORNIA STATE PRINTING OFFICE

67589 6-29 5800